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Protocols as curriculum? Learning health advocacy skills by working with transgender patients in the context of gender-affirming medicine

Kinnon R. MacKinnon[1,2] · Stella L. Ng[2] · Daniel Grace[1] · Suzanne R. Sicchia[1] · Lori E. Ross[1]

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Abstract

Evidenced by leading journals in academic medicine, health professions education has taken up the call to advance equitable healthcare. One pressing area where gaps and inequities are apparent is transgender (trans) people's access to gender-affirming medicine such as hormones and surgeries. Reasons for the dire state of care include education gaps. While specific content knowledge has been identified as lacking in medical school curricula, less research has focused on the complex social practices required of clinicians and educators working in gender-affirming medicine, and how these skills are learned through practice. In order to inform health professions education in this key area of need, we conducted a study to better understand the social practices, and the learning that occurs therein, of gender-affirming medicine. We identified the work processes of 22 clinicians, clinician-educators, trans patients, and clinical care administrators with attention to how policies and protocols influenced practice, learning, and teaching. The results of our study elucidate: (1) that practicing of gender-affirming medicine is strictly dictated by standardized assessment protocols, which serve as a form of curriculum; and (2) how health professionals learn and teach health advocacy as a form of resistance to protocols identified as creating inequities. These findings suggest an opportunity to view protocols—and their inherent limitations—more deliberately as teaching and learning tools, specifically for learning advocacy.

Keywords Health advocacy · Health professions education · Institutional ethnography · Protocols · Standards of care · Transgender